

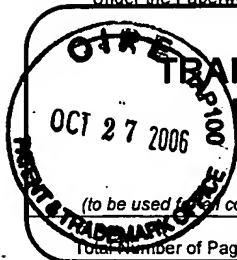
*DF*

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



# TRANSMITTAL FORM

(to be used for correspondence after initial filing)

Total Number of Pages in This Submission

**6**

Application Number	10/779,429
Filing Date	February 13, 2004
First Named Inventor	Jon A. Boaz
Art Unit	2612
Examiner Name	Sisay Yacob
Attorney Docket Number	027299.002

## ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. Fee Transmittal (check \$180); 2. Information Disclosure Statement; and 3. Postcard.
Remarks		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Bracewell & Giuliani LLP		
Signature	<i>[Signature]</i>		
Printed name	Jeffrey S. Whittle		
Date	10-25-06	Reg. No.	36,382

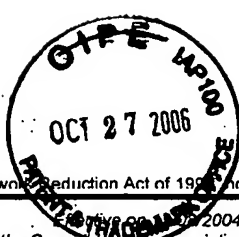
## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature	<i>[Signature]</i>		
Typed or printed name	Dora Rios	Date	10-25-2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL**  
**For FY 2005**☐ Applicant claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$)  
180**Complete if Known**

Application Number 10/779,429

Filing Date February 13, 2004

First Named Inventor Jon A. Boaz

Examiner Name Sisay Yacob

Art Unit 2612

Attorney Docket No. 27299.002

**METHOD OF PAYMENT (check all that apply)**☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_☒ Deposit Account Deposit Account Number: 500259 Deposit Account Name: Bracewell & Giuliani LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below☐ Charge fee(s) indicated below, except for the filing fee☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17☐ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	0
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>
- 20 or HP =	x	=
HP = highest number of total claims paid for, if greater than 20.		
<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>
- 3 or HP =	x	=
HP = highest number of independent claims paid for, if greater than 3.		

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	0	0

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): second supplemental IDS

Fees Paid (\$)

0

\$180

**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent) 36,382	Telephone 713-221-1185
Name (Print/Type)	Jeffrey S. Whittle		Date 10-25-06

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

**CERTIFICATE OF MAILING 37 C.F.R. 1.8(a)**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date indicated below.

10-25-2006

Dora Rios  
Dora Rios



**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Re Patent Application of:  
Jon A. Boaz

Serial No.: 10/779,429

Filed: February 13, 2004

For: AUTOMATED METER READING  
SYSTEM, COMMUNICATION AND  
CONTROL NETWORK FOR  
AUTOMATED METER READING,  
METER DATA COLLECTOR, AND  
ASSOCIATED METHODS

) Confirmation No. 9073  
)  
)  
)  
) Examiner: Sisay Yacob  
)  
)  
) Group Art Unit: 2612  
)  
)  
) Attorney Docket No. 027299.000002

**SECOND SUPPLEMENTAL INFORMATION DISCLOSURE**  
**STATEMENT UNDER 37 C.F.R. § 1.97**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313

Sir:

Attached is Form PTO-1449A listing references for consideration in the examination of the above-identified application. It is requested that these references be considered by the Examiner and officially made of record in accordance with the provisions of 37 C.F.R. § 1.97 and Section 609 of the M.P.E.P.

Applicant submits herewith the required fee of \$180. The Commissioner is hereby authorized to charge or credit any overpayments to the deposit account of Bracewell & Giuliani LLP, Deposit Account No. 50-0259 (Attorney Docket No. 027299.02).

Date: 10-25-06

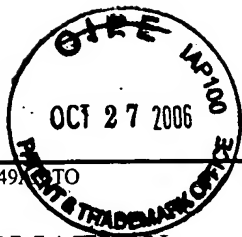
Respectfully submitted,

Jeffrey S. Whittle  
Jeffrey S. Whittle, Reg. No. 36,382  
BRACEWELL & GIULIANI LLP  
P.O. Box 61389  
Houston, Texas 77208-1389  
Telephone: (713) 221-1185  
Facsimile: (713) 221-2141

10/27/2006 SFELEKE1 00000052 10779429

01 FC:1806

180.00 DP



Substitute for form 1449, PTO

**INFORMATION  
DISCLOSURE  
STATEMENT BY  
APPLICANT**

(use as many sheets as necessary)

**Complete if Known**

<b>Application Number</b>		10/779,429
<b>Filing Date</b>		February 13, 2004
<b>First Named Inventor</b>		Boaz
<b>Art Unit</b>		2632
<b>Examiner Name</b>		Sisay Yacob
<b>Sheet</b>	1 of 1	<b>Attorney Docket Number</b> 027299.02

**U.S. PATENT DOCUMENTS**

Exr Initials*	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines Where Relevant Passages Or Relevant Figures Appear
	Number- Kind Code (if known)			
	6,044,062	03/28/2000	Brownrigg, et al.	
	7,054,271	05/30/2006	Brownrigg, et al.	
	20060098576	05/11/2006	Brownrigg, et al.	

**FOREIGN PATENT DOCUMENTS**

Exr Initials	Foreign Patent Document			Name of Inventor or Applicant of Cited Document	Date of Publication of Cited Document MM-YYYY	T <sub>1</sub>
	Country Code	Number	Kind Code (if known)			
		N/A				

**OTHER PRIOR ART - NON PATENT LITERATURE DOCUMENTS**

Exr Initials	Include Name of first Author (in CAPITAL LETTERS), title of the article (where appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), volume-issue number(s), page(s), date (in parentheses). If a book, also include publisher and city and/or county where published.
	N/A

Examiner Signature		Date Considered	
-----------------------	--	--------------------	--

2008066.1